

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000085514

FILED
Apr 21, 2004
Secretary of State

Entity Name: SUPERIOR MANAGERIAL CONSULTANTS INCORPORATED

Current Principal Place of Business:

310 WILDWOOD AVE
MARY ESTHER, FL 32569

New Principal Place of Business:

7728 NAVARRE PARKWAY
SUITE 507
NAVARRE, FL 32566 US

Current Mailing Address:

310 WILDWOOD AVE
MARY ESTHER, FL 32569

New Mailing Address:

P.O. BOX 5399
NAVARRE, FL 32566 US

FEI Number: 75-3115097

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HICKMAN, JAMES A
220 GOVERNMENT ST
STE 1
NICEVILLE, FL 32578 US

Name and Address of New Registered Agent:

CHRISTOPHER, JERRILYN N
P.O BOX 5399
NAVARRE, FL 32566 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JERRILYN N. CHRISTOPHER, "SIGNED"

04/21/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES () Change (X) Addition
Name: CHRISTOPHER, JERRILYN N
Address: 7728 NAVARRE PKWY STE. 507
City-St-Zip: NAVARRE, FL 32566 US

Title: VP () Change (X) Addition
Name: BRIDGES, DOROTHY S
Address: 301 HUNTER RD
City-St-Zip: LENA, MS 39094 US

Title: TREA () Change (X) Addition
Name: SHORTER, SHAKISKEA R
Address: 940 ASHLEY LANE APT. I
City-St-Zip: FORT WALTON BEACH, FL 32547 US

Title: SEC () Change (X) Addition
Name: CLARK, BRENDLYN C
Address: 5740 MAYBERRY AVE
City-St-Zip: ALTA LOMA, CA 94737 US

Title: D () Change (X) Addition
Name: CHRISTOPHER, TRACY
Address: 7728 NAVARRE PKWY STE. 507
City-St-Zip: NAVARRE, FL 32566 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JERRILYN N. CHRISTOPHER, "SIGNED"

PRES

04/21/2004

Electronic Signature of Signing Officer or Director

Date